

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.

10 611990

FILING DATE

07-03-03

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2	1					
3		2				
4		2				
5		2				
6		2				
7		2				
8		1				
9		2				
10		2				
11		2				
12		2				
13		2				
14		2				
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50						
TOTAL IND.	2					
TOTAL DEP.	29					
TOTAL CLAIMS	31					

	IND	DEP	IND	DEP	IND	DEP
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52						
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						